

Savvy Senior – January Columns

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Savvy Senior

Pill Splitting: When it's safe, and when it isn't

Splitting your pills – literally cutting them in half – is a simple way to save money on your prescription drugs but be sure you talk to your doctor first, because not all pills can be split. Here's what you should know.

Savings and Safety

The reason pill splitting is such a cost cutter is because of a quirk in the way drugs are manufactured and priced. A pill that's twice as strong as another may not be twice the price. In fact, it's usually about the same price. So, buying a double-strength dose and cutting it in half may allow you to get two months worth of medicine for the price of one. But is it safe? As long as your doctor agrees that splitting your pills is OK for you, you learn how to do it properly, and you split only pills that can be split, there's really no danger.

What to Do

If you're interested in pill splitting, the first step is to talk to your doctor or pharmacist to find out if any of the medicines you use can be safely split. It's also important to find out whether splitting them will save you enough money to justify the hassle.

The pills that are easiest to split are those with a score down the middle. However, not every pill that's scored is meant to be split. Pills that are most commonly split include:

- Cholesterol lowering drugs, like Crestor, Lipitor, and Pravachol
- Antidepressants, like Celexa, Paxil, and Zoloft
- High blood pressure medicines like, Monopril, Prinivil, Univasc, Zestril, Avapro and Cozaar.
- Erectile dysfunction pills, like Viagra, Cialis and Levitra

Having the right equipment helps too. Don't use a knife to cut your pills in half. It can cause you to split them unevenly resulting in two pieces with very different dosages, which can be dangerous. Purchase a proper pill cutter. They only cost around \$5 to \$10 and are available at most pharmacies and large discount stores.

For convenience, you might be tempted to split the whole bottle of pills at once. But check with your doctor first. It's possible that exposing the interior of the pills to the air could reduce their effectiveness. It's also important to know that pills are only safely split in half, and never into smaller portions such as into thirds or quarters.

Unsafe Splitting

Many medicines, because of their ingredients or design, cannot be split safely. Here's a list of pills that should not be split:

- Blood thinners (Coumadin, warfarin).
- Chemotherapy drugs.
- Anti-seizure medicines.
- Birth control pills.
- Capsules of any kind that contain powders or gels.
- Pills with a hard outside coating.
- Extended-release pills that deliver medication over time in your body.
- Pills that are coated to protect your stomach.
- Pills that crumble easily, irritate your mouth, or taste bitter.

Again, your doctor or pharmacist will know which drugs can and cannot be split. If you're taking a medicine that can be split, you'll need to get a prescription from your doctor for twice the dosage you need. Then you can start splitting and saving, safely.

Send your senior questions to: Savvy Senior, P.O. Box 5443, Norman, OK 73070, or visit SavvySenior.org. Jim Miller is a contributor to the NBC *Today* show and author of "*The Savvy Senior*" book.

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How to Choose and Use a Cane

When it comes to choosing a cane for walking and support, just any old cane won't do. Canes come in many shapes and sizes today, and choosing the right fit is very important for your comfort and safety. Here's what you should know.

Types of Canes

Not surprisingly, the most widely used assistive device in the U.S. is the cane, used by nearly 5 million people. The kind of cane you get should be determined by the amount of support you need and the style of grip you prefer. Here are the basic types of canes you'll have to choose from:

- Crook or "C" cane: Shaped like a candy cane with the curved handle, this is the most common and basic type of cane and the least expensive, starting as low as \$10.
- Ergonomic-handle canes: These types of canes have bigger, ergonomic shaped handles (there are lots of styles to choose from) which provides a more comfortable and secure grip than a crook cane. Usually made of lightweight aluminum or wood, most of the aluminum models are adjustable in height and some even fold up which is convenient for travel. Prices typically range between \$20 and \$80.
- Offset-handle cane: This style has a swan neck curve in the upper part of the shaft that puts the user's weight directly over the cane tip, making it ideal for people who need extra stability. Starting at around \$25, offset-handle canes are typically aluminum, adjustable and come with a flat, soft grip handle that's easy on the hands.
- Knob cane: Also known as brass handle or parrot head canes this style is best suited for people who need a cane only for balance or mild weight bearing.

- **Quad cane:** This cane works best for people who need maximum weight bearing and support. As the name implies, a quad cane comes with four separate tips at the base and usually have an offset flat handle, and cost \$30 and up.

Make it Fit

Many canes are adjustable, but some are not. To make sure your cane is the right fit; stand up with your arms hanging straight down at his side. The top of the cane should line up with the crease in your wrist. And, with the cane in your hand, your elbow should bend at a comfortable 20 degree angle.

If his cane is too long, it won't provide the support you needs. Too short, and you'll have to lean or bend over to use it which is uncomfortable and may even cause you to fall.

Check the Tip

The rubber tip on the end of your cane grips the floor and helps provide traction. Make sure the tip is supple and the tread is in good shape. If the tip looks worn, buy a replacement tip at a pharmacy or medical supply store.

How to Use

When using a cane, it should always be held in the hand opposite of the leg that needs support. For example, if your foot, knee or hip pain is on his right side, you should use the cane in your left hand. The cane should then move forward as you step forward with the bad leg.

If you have to go up stairs, you should lead with the good leg. And when you goes down stairs, the cane and bad leg should go first. To help, the Mayo Clinic offers a slide show on their Web site (www.mayoclinic.com/health/canes/HA00064) that will show you how to choose and use a cane. It's also a smart idea to work with your doctor or physical therapist.

Where to Buy

You can find canes at drugstores, discount retailers, home medical supply stores and online at sites like www.canemart.com and www.fashionablecanes.com. And if money is a concern, most insurers, including Medicare, help cover the cost of a new cane with a written prescription from a physician.

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Glaucoma Sneaks Up On Seniors

It's known as the "silent thief of sight!" With no early warning signs or symptoms, most people that have glaucoma don't realize it until their vision begins to deteriorate. Are you at risk for glaucoma? Here's what you should know.

Glaucoma is a group of eye diseases that can damage the optic nerve and cause vision loss and blindness if it's not treated. This typically happens because the fluids in the eye don't drain properly, causing increased pressure in the eyeball. The two main types of glaucoma that affect most people are:

- **Open-angle glaucoma:** This is the most common form, accounting for around 80 percent of cases in the U.S. This type progresses very slowly when the eye's drainage canals become clogged over time, leading to blind spots in the peripheral vision, but by the time you notice it, the permanent damage is already done.
- **Angle-closure glaucoma:** Occurs when the drainage canal gets blocked, causing a rapid increase in eye pressure. Symptoms include nausea, blurred vision and severe pain. If you have these symptoms, get to an emergency room immediately.

Are You At Risk?

It's estimated that more than 4 million Americans today have glaucoma but only about half of them know that have it. Are you one of them? Here are the key factors that can increase your risks:

- **Age:** While anyone can get glaucoma, people over the age of 60 are six times more likely than those younger.
- **Family history:** Having a brother, sister or parent with glaucoma increases your risk of developing this disease by four to nine times.
- **Race:** African-Americans are six to eight times more likely to get glaucoma than are Caucasians, and they are much more likely to experience permanent blindness as a result. Hispanic-Americans also have an increased risk of developing glaucoma earlier in life, and Asians also have a higher risk for developing angle-closure glaucoma.
- **Health conditions:** Diabetes, high blood pressure, heart disease, hypothyroidism, migraine headaches and even being nearsighted can increase your risk.
- **Medications:** Studies show that long-term use or high-doses of steroid drugs or cortisone can put you at a higher risk.
- **Injury:** An injury or trauma to the eye can cause glaucoma even years after it happened.

What to Do

Early detection is the key to guarding against glaucoma. So if you're age 45 and older and have any risk factors, you need to get a comprehensive eye examination every year or two. Or, if you notice some loss of peripheral vision, get to the eye doctor right away.

While there's currently no cure for glaucoma, most cases can easily be treated with prescription eye drops which can prevent further vision loss (it cannot restore vision already lost from glaucoma). If that doesn't work, your doctor may recommend oral medication, laser treatments, surgery or a combination of these methods.

Screening Help

If you have Medicare Part B, annual eye examinations are covered for those at high risk for glaucoma. Also check out the Glaucoma EyeCare program through EyeCare America (www.eyecareamerica.org; 800-222-3937). This is a nationwide program that provides

free or low-cost glaucoma eye exams and the initiation of treatment, if needed, and there are no income restrictions.

Savvy Tip: To learn more, the Glaucoma Research Foundation offers comprehensive information on their Web site along with a variety of free educational booklets you can order. Visit www.glaucoma.org or call 800-826-6693.

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Tax Help for Lower Income Seniors

According to the Tax Policy Center, around 55 percent of Americans over age 65 won't have to file income tax returns this year mainly because their incomes are under the IRS filing requirements. Will you have to file? Here's what you should know.

2009 Filing Requirements

If your “gross income” is below the 2009 IRS filing limits, you don't have to file a federal tax return this year. Gross income includes all the income you receive that is not exempt from tax, not including Social Security benefits, unless you are married and filing separately. Here's an income breakdown for each filing status.

- Single: If your 2009 gross income was less than \$9,350 (\$10,750 if you're 65 or older), you don't have to file.
- Married filing jointly: You don't need to file if your gross income was under \$18,700. If you or your spouse is 65 or older the limit increases to \$19,800. And if you're both over 65, your income must be under \$20,900 to not file.
- Head of household: If your gross income was below \$12,000 (\$13,400 if age 65 or older), you don't have to file.
- Married filing separately: At any age, you must file if your income was at least \$3,650.
- Qualifying widow(er) with a dependent child: If your gross income was less than \$15,500 (\$16,150 if age 65 or older), you don't need to file.

Note: Just because you're not required to file a federal tax return doesn't necessarily mean you're also excused from filing state income taxes. Check on that with your state tax agency before concluding you're entirely in the clear. For links to state and local tax agencies see www.taxadmin.org – click on “Links.”

Senior Tax Credit

If you find that your gross income is more than the IRS filing limits, you'll need to file a federal tax return. But depending on your income level, you may be eligible for an elderly tax credit, which can amount to as much as \$750 for a single taxpayer and up to \$1,125 for a couple.

To qualify, you must be 65 or older (or under 65 and disabled), a U.S. citizen, and your adjusted gross income must be less than \$17,500 for a single filer, and the non-taxable part of your Social Security or other nontaxable pensions, annuities or disability income must be less than \$5,000. Or, if you're married and are filing jointly and you both qualify, your income will need to be less than \$25,000, and your nontaxable Social Security or other nontaxable pensions must be under \$7,500. To claim the credit you'll need to file either Schedule R, if you are filing Form 1040, or Schedule 3, if you are filing Form 1040A. To learn more, see IRS publication 524 "Credit for the Elderly or Disabled" at www.irs.gov/pub/irs-pdf/p524.pdf, or call 800-829-3676 and have them mail you a copy.

Tax Prep Help

If you do need to file a tax return, you can get help through the IRS sponsored Tax Counseling for the Elderly (TCE). This program provides free tax preparation and counseling to middle and low income taxpayers, age 60 and older. Call 800-906-9887 to locate a service near you. Also check with AARP, a participant in the TCE program that provides free tax preparation at more than 7000 sites nationwide. To locate an AARP Tax-Aide site call 888-227-7669 or visit www.aarp.org/money/taxaide.

Savvy Tips: If you have tax questions the IRS offers a helpline at 800-829-1040, or visit a nearby IRS Taxpayer Assistance Center (see www.irs.gov/localcontacts) where you can get face-to-face help for free. Also see www.irs.gov/individuals/retirees for a variety of tax tips for seniors.

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Treatment Options for a Common Male Problem

When it comes to treating erectile dysfunction (ED), most men know of only three options: Viagra, Cialis or Levitra – the frequently advertised drugs on television. But there are a variety of other treatments that can help too.

With an estimated 30 million U.S. men affected, ED is a relatively common problem especially in older men. In fact, nearly one-third of all men in their 50's experience ED, and more than half of those in their 60's have the problem.

The first step you need to take in finding a solution to your erectile problem, is to see a doctor who specializes in ED (usually a urologist) so he can find out what's causing it. Depending on what he finds, here are the treatment options.

Lifestyle Fixes: For many men, ED is the sign of an underlying health condition like diabetes or hypertension. In fact, in younger men, erection problems are often the first symptom of cardiovascular disease. If this is your problem, adopting a healthier lifestyle such as losing weight, exercising regularly, improving your diet and not smoking may be all you need to fix the problem.

Pills: The convenience and effectiveness of Viagra, Cialis and Levitra make them popular treatment options for many men, but it's important to know that these drugs don't work for everyone and they can be rather costly. One Viagra pill, for example, costs about \$15, and many insurers including Medicare don't cover ED medications.

Shots or Suppositories: Another treatment to ask about is a shot of alprostadil, which is given directly into the penis with a tiny needle to create an erection. Your doctor can teach you how to do the injection yourself at home. The shots cost about \$35 per injection and are covered by many insurers, but not by Medicare. Or, for a less expensive option ask your doctor about a generic combination of alprostadil, papaverine and phentolamine.

If injecting yourself with a needle gives you queasy, a suppository that's inserted inside the urethra – containing alprostadil – is also available, though it is not considered as effective as the shots.

Vacuum Pumps: This is a drug-free treatment that's very effective for many men. A penis vacuum pump works by pulling blood into your penis to make it erect. Then you put a snug ring around the base to maintain the erection, which lasts long enough to have sex. The cost for this device, which requires a prescription, can run from \$300 to \$600 but most insurers including Medicare will cover part of the cost. You can also buy a nonprescription pump online (*Amazon.com* carries some) for as little as \$30.

Implants: If all the previous treatments fail, ask your doctor about a penile implant. The most common type is the inflatable implant where two cylinders are placed inside the penis that can be inflated anytime you want to create an erection. Most insurers including Medicare will cover this surgery.

Surgery: A last resort is vascular reconstructive surgery to improve the blood supply of the penis. It's the equivalent to a coronary artery bypass, but it is rarely performed and there are only a handful of surgeons in the country who do it.

Therapy: If your ED is psychological and not physical, your doctor may prescribe sex therapy as your treatment. Psychological ED is often caused by stress, such as: work worries, financial worries, relationship conflicts and poor sexual communication.

Other Treatments: If testosterone deficiency is causing your ED, your doctor may prescribe testosterone patches, pills, gels or injections to give you a boost. Or, if you're a believer in alternative treatments, nutritional supplements (arginine, bioflavonoids, zinc, Vitamin C and E, and flaxseed meal), herbal remedies (ginseng or ginkgo) and even acupuncture have been used to improve their ED, but be sure you talk to your doctor before you try anything.

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